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Bib Data Sheet

CONFIRMATION NO. 9299

<b>SERIAL NUMBER</b> 10/039,247	<b>FILING DATE</b> 01/04/2002 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2682	<b>ATTORNEY DOCKET NO.</b> YOR920010342US1 (590.070)		
<b>APPLICANTS</b> Scott K. Reynolds, Granite Springs, NY;						
** CONTINUING DATA *****						
** FOREIGN APPLICATIONS *****						
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 02/05/2002						
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no		<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 15	<b>INDEPENDENT CLAIMS</b> 1	
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance						
Verified and Acknowledged		Examiner's Signature		Initials		
<b>ADDRESS</b> 35195						
<b>TITLE</b> Two-stage variable-gain mixer employing shunt feedback						
<b>FILING FEE RECEIVED</b> 740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees			
			<input type="checkbox"/> 1.16 Fees ( Filing )			
			<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )			
			<input type="checkbox"/> 1.18 Fees ( Issue )			
			<input type="checkbox"/> Other _____			
			<input type="checkbox"/> Credit			



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<b>APPLICANTS</b> Scott K. Reynolds, Granite Springs, NY; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 02/05/2002</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 15	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> FERENCE & ASSOCIATES 129 Oakhurst Road Pittsburgh, PA 15215					
<b>TITLE</b> Two-stage variable-gain mixer employing shunt feedback					
<b>FILING FEE RECEIVED</b> 740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		